

Exhibit 4

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Page 1

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK
CASE NO: 1:20-cv-05589-GBD-DCF

-----x
BRIAN JOSEPH GREF,)
Plaintiff)
)
-versus-)
)
AMERICAN INTERNATIONAL INDUSTRIES, individually and)
as successor-in-interest for the CLUBMAN BRAND, and)
To THE NESLEMUR COMPANY and PINAUD COMPANY, et al.,)
Defendants.)
-----x

TRANSCRIPT of the Virtual Videotaped
Deposition of the witness, JACQUELINE MOLINE, MD,
taken by Defendant, called for Oral Examination in
the above-captioned matter, said deposition being
taken pursuant to Federal Rules of Civil Procedure
by and before, ELEANOR SEKULIC, a Notary Public on
Wednesday, July 6, 2022, commencing at 11:16 a.m.

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<p style="text-align: right;">Page 138</p> <p>1 Jacqueline Moline, MD - Direct 2 Q. Okay. The rest of it is the title of paper. 3 Is that what I left out? 4 MR. DIMUZIO: Objection to form. 5 A. And when it was published and where it was 6 published, but, yes. 7 Q. Okay. 8 So let's go through the steps real quick, if 9 we can. The first step is, was the person exposed 10 to a toxin? And, for you, the toxin would be 11 whatever the carcinogenic agent would be, right? 12 A. Correct. 13 Q. And -- 14 A. Or -- no, it doesn't have to be -- it doesn't 15 have to be carcinogen. It's a toxin. Someone could 16 develop liver fibrosis if they're exposed to a toxic 17 agent. So it doesn't say carcinogen anywhere there. 18 Q. So it doesn't need to be a carcinogen to be 19 here? Or no? When we're talking about Mr. Gref and 20 your opinion in this case, does it have to be a 21 carcinogen? 22 MR. DIMUZIO: Objection. Form. 23 Vague and ambiguous. 24 A. Well, in this particular instance I'm talking 25 about asbestos, which is a carcinogen. But my point</p>	<p style="text-align: right;">Page 140</p> <p>1 Jacqueline Moline, MD - Direct 2 A. Correct. 3 Q. You indicate that there's no dispute in the 4 medical literature but you don't cite any particular 5 medical literature. Is there any particular medical 6 literature that you would cite with respect to 7 peritoneal mesothelioma? 8 A. I mean, I talked about Kradin, I talked about 9 the Welch paper. I can point you to occupational 10 medicine textbooks by Rohm and others. And it's 11 widely accepted in the occupational and 12 environmental literature that mesothelioma, both 13 peritoneal and pleura, as well as in CDC documents 14 and -- it's just widely accepted. 15 Q. All right. 16 Number 3, was the person exposed to the toxin 17 at a level where the injury has occurred in other 18 settings? And then you mention that there's 19 analogous exposure scenarios, your phrase. And then 20 you reference Footnote 2 on the bottom of 21. Let 21 me get to it. That references a number of different 22 articles and studies. Do you see that on the bottom 23 of Page 21? 24 A. Yes. 25 Q. And that's what you're talking about, those</p>
<p style="text-align: right;">Page 139</p> <p>1 Jacqueline Moline, MD - Direct 2 is, this is a methodology that can be used for 3 non-carcinogenic toxins or toxicants as well. And 4 it doesn't say was the individual exposed to a 5 carcinogen? It says were they exposed to a toxic 6 agent? Not all toxicities are cancers. That was my 7 point. 8 Q. Okay. 9 A. You were inferring something that is not 10 stated in the words on the page. 11 Q. I just wanted to know if you believe that in 12 order to be a toxin, for purposes of this case, it 13 has to be carcinogenic? 14 MR. DIMUZIO: Objection. Form. 15 Vague and ambiguous. And asked and answered. 16 A. For the purpose of this case, we're talking 17 about asbestos in mesothelioma. Mesothelioma is a 18 cancer. So, in this particular instance, the toxin 19 has to be carcinogenic but it doesn't imply that 20 this methodology can only be used for a carcinogen. 21 Q. All right. 22 Step 2, does the toxin cause the disease that 23 the person has? And then the cancer that the person 24 has in this instance is peritoneal mesothelioma; is 25 that right?</p>	<p style="text-align: right;">Page 141</p> <p>1 Jacqueline Moline, MD - Direct 2 references in Footnote 2 that are "analogous 3 exposure scenarios"? 4 A. With respect to talc, yes. 5 Q. All right. 6 So, for any of those listed, and you have 7 there -- first of all, "recently" -- you say in the 8 body of Page 21, "As described above and recently 9 referenced by the Centers For Disease Control, as 10 well as the published -- as well as published in 11 peer reviewed literature." "Referenced by the 12 Centers for Disease Control," what's that reference 13 to? Is that the 2017 Mazurek? 14 A. Yes. 15 Q. That is, okay. 16 So, and then, in Footnote 2 there you mention 17 '94 Andron, A-N-D-R-I-O-N, a number of different -- 18 the 1992 Bulbulyan, B-U-L-B-U-L-Y-A-N, 2012 19 Finkelstein, 2001 Ghio, G-H-I-O, the 2005 Fujiwara, 20 F-U-J-I-W-A-R-A, 2015 Ilgren, 1988 Lamb, 2017 21 Mirabelli, M-I-R-A-B-E-L-L-I, the 2009 Musti, 22 M-U-S-T-I, 2020 Dr. Moline, and 2020 Emory. Those 23 you're saying are analogous exposure scenarios, 24 right? 25 MR. DIMUZIO: Objection. Form.</p>

<p style="text-align: right;">Page 142</p> <p>1 Jacqueline Moline, MD - Direct</p> <p>2 A. In the sense that they were mesotheliomas</p> <p>3 which arose after exposure to talc.</p> <p>4 Q. Okay.</p> <p>5 Which one of those are, if we can just narrow</p> <p>6 it down, are peritoneal mesotheliomas?</p> <p>7 A. Well, Andrion says it in the title. I don't</p> <p>8 remember whether Bulbulyan was pleural or</p> <p>9 peritoneal. The pleurodesis was talking about</p> <p>10 pleural effusions. Fujiwara is talking about</p> <p>11 pericardial. I don't think Ilgren specified. Lamb,</p> <p>12 I believe it was a pleural. Mirabelli, I believe it</p> <p>13 was a pleural. Musti, I believe it was a</p> <p>14 peritoneal, in the paper that I cited, it was both</p> <p>15 pleural and peritoneal, as was Emory both pleural</p> <p>16 and peritoneal.</p> <p>17 Q. All right.</p> <p>18 The Andrion was a case report based on a</p> <p>19 mother's description to the author, right, a single</p> <p>20 case?</p> <p>21 A. Correct.</p> <p>22 Q. And we don't have any information as to the</p> <p>23 type of product he says he used, or the mother says</p> <p>24 he used?</p> <p>25 A. Correct.</p>	<p style="text-align: right;">Page 144</p> <p>1 Jacqueline Moline, MD - Direct</p> <p>2 at to compare their lifetime cumulative asbestos</p> <p>3 exposure from all sources of any the individuals</p> <p>4 that you reported on in your article, right?</p> <p>5 MR. DIMUZIO: Objection. Form.</p> <p>6 And asked and answered.</p> <p>7 A. There's the number of years that they used</p> <p>8 talcum powders. That's it.</p> <p>9 Q. That's not what I'm asking. I'm trying to</p> <p>10 understand if we know if they are -- if we have</p> <p>11 information that we can look at to show what else</p> <p>12 they could have -- I'm sorry -- what actual asbestos</p> <p>13 exposures they could have had during their lifetime</p> <p>14 if they had asbestos-related cancers?</p> <p>15 A. There's nothing specified in my paper or in</p> <p>16 Emory's that would allow you to do that.</p> <p>17 Q. And there's nothing in either of those two</p> <p>18 papers that would allow us to compare and contrast</p> <p>19 what Mr. Gref says or claims he used versus what any</p> <p>20 of the individuals that are summarized in either of</p> <p>21 your two articles or reports, right, there's nothing</p> <p>22 that we can look at to compare exposure claims?</p> <p>23 MR. DIMUZIO: Objection. Form.</p> <p>24 A. You could look at the different -- the years</p> <p>25 of use, and you could look at the latency, and you</p>
<p style="text-align: right;">Page 143</p> <p>1 Jacqueline Moline, MD - Direct</p> <p>2 Q. And there's no specific cumulative dose or</p> <p>3 product specific dose as to the particular</p> <p>4 individual in the Andriion study?</p> <p>5 A. Correct.</p> <p>6 Q. And the same would go for Musti, there's no</p> <p>7 particular cumulative dose specified or product</p> <p>8 specific dose or information about a product that we</p> <p>9 could investigate or look into, right?</p> <p>10 MR. DIMUZIO: Objection. Form.</p> <p>11 A. Not that I'm aware.</p> <p>12 Q. And with respect to your case series and Dr.</p> <p>13 Emory's case series, is there anything that you can</p> <p>14 provide us with that would allow us to compare</p> <p>15 either the cumulative doses of those individuals for</p> <p>16 their lifetime for all sources or any product</p> <p>17 specific dose for any of those individuals?</p> <p>18 MR. DIMUZIO: Objection. Form.</p> <p>19 A. In would be in the paper I wrote, it just has</p> <p>20 the number of years of exposure and the different</p> <p>21 products they used. In terms of Emory, I don't</p> <p>22 remember if they specified the products.</p> <p>23 Q. I'm sorry. Were you finished? I'm sorry.</p> <p>24 A. Yes.</p> <p>25 Q. But there's no specific data that we can look</p>	<p style="text-align: right;">Page 145</p> <p>1 Jacqueline Moline, MD - Direct</p> <p>2 could look at the location and the different brands</p> <p>3 in my paper. I can't speak to Emory.</p> <p>4 Q. Well, we can't look at anything that would</p> <p>5 estimate or attempt to estimate the alleged product</p> <p>6 contents or the dose of any particular individual</p> <p>7 and then compare it against Mr. Gref, right?</p> <p>8 MR. DIMUZIO: Objection. Form.</p> <p>9 A. That wasn't the purpose of the paper. I don't</p> <p>10 know how you would do that. I don't know how you do</p> <p>11 that in any paper, actually.</p> <p>12 Q. Okay.</p> <p>13 So step four is whether other explanations for</p> <p>14 the condition have been excluded. Why is that step</p> <p>15 important?</p> <p>16 A. Again, because this was a general causation,</p> <p>17 you look to see if there could be other reasons that</p> <p>18 someone has the disease. And because -- they were</p> <p>19 duplicative or super additive, or there could have</p> <p>20 been another reason why they had a particular</p> <p>21 disease in general. And so, you look at that in the</p> <p>22 same way that you look at someone with heart</p> <p>23 disease. You would say do they have diabetes and</p> <p>24 hypertension? They could both contribute.</p> <p>25 Q. So, when you asked yourself that question, if</p>

Page 202	Page 204
1 Jacqueline Moline, MD - Cross	1
2 Q. Well, you mainly read and rely upon Dr.	2 A C K N O W L E D G E M E N T
3 Longo's testing and his reports, correct?	3 STATE OF
4 A. No, I wouldn't say that. I rely on Dr.	4 COUNTY OF
5 Compton's reports, as well as others.	5
6 Q. I understand. But you rely on -- you rely on	6 I, the undersigned, hereby certify that
7 both Dr. Compton and Dr. Longo's reports as	7 I have read the transcript of my testimony taken
8 presented to you by Plaintiff's counsel, right?	8 under oath in my deposition; that the transcript is
9 MR. DIMUZIO: Objection to form.	9 a true and complete and correct record of my
10 Asked and answered.	10 testimony, and that the answers on the record as
11 A. I have relied on both of their reports, yes.	11 given by me are true and correct.
12 Q. And if --	12
13 MR. DIMUZIO: Counsel, it's 4:59.	13
14 I think Dr. Moline has got to go. We can make some	14 JACQUELINE MOLINE, MD
15 statements about reserving rights and that sort of	15
16 thing. But I think it's about time for the depo to	16 Signed and subscribed to and before me
17 end, given her time commitment.	17 This _____ day of _____, 2022
18 MR. THACKSTON: Well, let me just	18
19 ask one last question.	19
20 Q. If you assume for me Dr. Compton said he found	20 NOTARY PUBLIC
21 anthophyllite in those six samples and Dr. Longo	21
22 says there are no amphiboles in those six samples,	22
23 who do you rely on?	23
24 MR. DIMUZIO: Objection. Form.	24
25 Incomplete hypothetical. Lack of foundation.	25
Page 203	Page 205
1 Jacqueline Moline, MD - Cross	1
2 A. Again, I'm going to have to look at both of	2 C E R T I F I C A T E
3 the reports and probably have a discussion with them	3 STATE OF NEW YORK)
4 to figure out why there's a discrepancy.	4 COUNTY OF NEW YORK)
5 Q. Okay.	5
6 Doctor, we certainly hold open the deposition	6 I, ELEANOR SEKULIC, a Notary Public of the
7 to continue it at another time. Thank you very much	7 State of New York, do hereby certify that the
8 for your time today.	8 foregoing deposition of JACQUELINE MOLINE, MD was
9 THE VIDEOGRAPHER: We are off the	9 taken by and before me on July 6, 2022.
10 record at 5 p.m., and this concludes today's	10 The said witness was duly sworn before the
11 testimony given by Dr. Jacqueline Moline. The total	11 commencement of her testimony, the said testimony
12 number of media units used is five and will be	12 was taken stenographically by myself and then
13 retained by Priority-One, a Veritext company.	13 transcribed. The within transcript is a true record
14 Thanks everybody.	14 of the said deposition.
15 (Deposition Adjourned.	15 I am not connected by blood or marriage with
16 Time Noted: 5:00 p.m.)	16 any of the said parties, nor interested directly or
17	17 indirectly in the matter in controversy, nor am I in
18	18 the employ of any of the Counsel.
19	19
20	20 DATED: _____
21	21 
22	22
23	23 ELEANOR SEKULIC
24	24
25	25